

2012

**BEDFORD RECREATION & PARKS DEPARTMENT**  
**SWIM & DIVE TEAM REGISTRATION – Deadline Friday, June 15**

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- ☐ Participants must be between the ages of 6-18 (as of 7/1/12)
- ☐ Participants must be able to swim the length of the pool/25 meters without assistance
- ☐ Participants must be a resident of the hamlet they are joining
- ☐ Participants must have a valid 2012 pool ID card
- ☐ Please fill out one form per child

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Child's Name: \_\_\_\_\_ D.O.B. \_\_\_\_\_

Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip: \_\_\_\_\_

Male: \_\_\_\_\_ Female: \_\_\_\_\_ Age as of 6/1/12: \_\_\_\_\_ Age as of 7/1/12: \_\_\_\_\_

Did you participate **prior to 2007**: YES \_\_\_\_\_ NO \_\_\_\_\_

I would like to join: Swim Team: \_\_\_\_\_ Dive Team: \_\_\_\_\_

**Hamlet:** Katonah (298660) \_\_\_\_\_ Bedford Hills (298560) \_\_\_\_\_ Bedford Village (298460) \_\_\_\_\_

**Clothing Size:** Child Sm. \_\_\_\_\_ Child Med. \_\_\_\_\_ Child Lrg. \_\_\_\_\_

Adult Sm. \_\_\_\_\_ Adult Med. \_\_\_\_\_ Adult Lrg. \_\_\_\_\_ Adult XL \_\_\_\_\_

**Day Camp Participants Only:** Do you require a staff member to escort your child to day camp? \_\_\_\_Yes \_\_\_\_No

Child's specific health problems: \_\_\_\_\_

Medications: \_\_\_\_\_ Allergies: \_\_\_\_\_

Doctor's Name: \_\_\_\_\_ Phone: \_\_\_\_\_

Insurance Carrier/ID Number: \_\_\_\_\_

Mother's Name: \_\_\_\_\_ Cell # \_\_\_\_\_ Home # \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Father's Name: \_\_\_\_\_ Cell # \_\_\_\_\_ Home # \_\_\_\_\_

E-Mail Address: \_\_\_\_\_

Emergency Contact: \_\_\_\_\_ Relationship: \_\_\_\_\_ Phone: \_\_\_\_\_

**General Release:** The undersigned hereby releases the Town of Bedford, its Town Board, Recreation and Parks Department, employees and volunteers thereof, of any responsibilities should an accident or injury occur to the above named participant as a result of participation in the aforementioned program sponsored by the Bedford Recreation and Parks Department. I understand the department and/or swim & dive committees may use photos taken during events unless I notify them in writing.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Cash \_\_\_\_\_ Check \_\_\_\_\_ Credit Card \_\_\_\_\_ Amount Paid \_\_\_\_\_

**Payable to "Town of Bedford" – return to Bedford Recreation, 425 Cherry St., Bedford Hills, NY 10507**

**SEE REVERSE OF FORM**

## Swim & Dive Team Fees

|   |          |
|---|----------|
| 1 <sup>st</sup> child in the family =                 | \$100.00 |
| 2 <sup>nd</sup> child in the family =                 | \$ 90.00 |
| 3 <sup>rd</sup> child in the family =                 | \$ 80.00 |
| 4 <sup>th</sup> child+/senior swimmer 15+ (by 6/1/12) | FREE     |

## Swim & Dive Team Contacts

### Division II - Katonah

Parent Rep: Kim Buckley

[www.katonahswimanddiveteam.org](http://www.katonahswimanddiveteam.org)

[walkbuck@aol.com](mailto:walkbuck@aol.com)

### Division III - Bedford Village

Co-Parent Rep: Rosalie Bastone

Co-Parent Rep: Denice Delfico

[www.bedfordvillageswimanddive.org](http://www.bedfordvillageswimanddive.org)

[rosalie.bastone@gmail.com](mailto:rosalie.bastone@gmail.com)

[ndsnr@optonline.net](mailto:ndsnr@optonline.net)

### Division V - Bedford Hills

(Note: Division V does not dive – this will be a swim team only in 2012)

Parent Rep: TBD – call Daryl Sudlow@666-7004 to volunteer

## Important Phone Numbers

|                      |                    |                    |          |
|----------------------|--------------------|--------------------|----------|
| Katonah Pool         | 232-9349           | Bedford Hills Pool | 666-7150 |
| Bedford Village Pool | 234-3246           | Bedford Recreation | 666-7004 |
|                      | Recreation Hotline | 864-3777           |          |

## Meet & Greet Your Coaches

A “Meet & Greet” will be scheduled prior to the beginning of the season to meet the coaches, ask questions, learn more about the program & volunteer to help out the team. Teams also use this day for swim suit fittings. Check your team website or with your parent rep for more information.

## \*Tentative Pre-Season Swim Team Practice Schedule

|         |                |              |                       |
|---------|----------------|--------------|-----------------------|
| Mon-Wed | June 4-6       | 4:00-7:00pm  |                       |
| Mon-Wed | June 11-13     | 4:00-7:00pm  |                       |
| Sat.    | June 9, 16, 23 | 8:00-10:00am |                       |
| Mon-Fri | June 18-22     | 6:30-8:30pm  | Partial team practice |

\*Pre-Season Swim Practice Schedule is tentative – please check your teams website or with your coaches for confirmed dates & times. Time listed is time available not necessarily what your team will use/schedule.

\*Please check your team’s website or with your coach for Dive team pre-season practice schedule.

## \*\*Regular Season Swim Team Practice Schedule

|         |                  |             |                         |
|---------|------------------|-------------|-------------------------|
| Mon-Fri | June 25-August 3 | 7:30-8:45am | no practice Wed. July 4 |
|---------|------------------|-------------|-------------------------|

\*\*Regular season ends with Championships & All-Stars on Sat/Sun Aug 4 & 5. If your team goes to the Counties then season will extend into the week of August 6.

Regular Season Dive team practice is held in the afternoons anytime after 4:00pm for a one to two hour time block based on the size of the team. Pre-season TBD.